

# Trident Public Health District

Serving Berkeley, Charleston, & Dorchester Counties

## Annual Report

7/1/02 - 6/30/03

Trident Public  
Health District



**Public Health Works For You**

# *From the District Health Director*

In the past year the Trident Public Health District made substantial progress toward our goal of safeguarding the public's health. We continued a leadership role in preparing for a possible bioterrorism event in addition to combating the threats of diseases such as cancer, heart disease, and HIV/AIDS. Among the challenges public health faced during the year were:

- ◆ Emerging diseases from an interconnected world.
- ◆ Developing staff skills and competencies to respond to bioterrorist events.
- ◆ Chronic disease statistics that are among the worst in the nation
- ◆ Health disparities existing despite a wealth of health resources in the community.
- ◆ Public Health's changing roles
- ◆ Reduction in state funding

The speed at which disease can spread throughout the world was brought to the forefront in the spring of 2003 when Severe Acute Respiratory Syndrome (SARS) started in a province in China and quickly spread with travel to other Asian countries and to North America, most notably Canada. But, public health is learning to be able to react faster, and the spread of this new disease was quickly controlled with the proven public health measures of quarantine and prevention. The US experienced the introduction of Monkeypox transmitted to prairie dogs, and, ultimately, people, from rodents imported from Africa. Public Health dealt with the rapid spread of Norwalk virus on cruise ships. The threat of bioterrorism remained, and smallpox vaccinations were offered in the United States to healthcare professionals for the first time since 1972. To help us become better prepared for this new issue, our Epi team was expanded to include an infectious disease physician and a second full time nurse, plus, we added a Director of Public Health Preparedness to address planning for emergency situations.

In April of 2003, the Health Information Privacy and Portability Act (HIPPA) became effective. This new federal act required changes in our operations. All staff underwent training specific to the HIPPA regulations and changes were required in our physical environments, procedures and systems to protect patient confidentiality.

During the year we also addressed state and local issues. Effective June, 2003, the South Carolina Department of Health & Environmental Control (DHEC) became required by law to publish a list each year of health conditions for which children and staff should not attend school or child care settings. We discontinued offering well child check ups in the district, and our last maternity clinic was turned over to Medical University of South Carolina. Two of our staff were called to active military duty and sent to the Middle East. And, we operated with the lowest budget level in five years. Since 85% of our budget is directed towards personnel expenses, this meant as positions became vacant, they remained vacant for extended periods of time. In a number of cases, they remain vacant as we moved into a year that may represent even further budget reductions.

As you can see, the 2002/2003 fiscal year was one of many challenges for the Trident District. But, we successfully faced all our problems and maintain a positive framework to be able to move forward.

Regards,

John Simkovich, DDS, MHA  
District Health Director, Trident Public Health District

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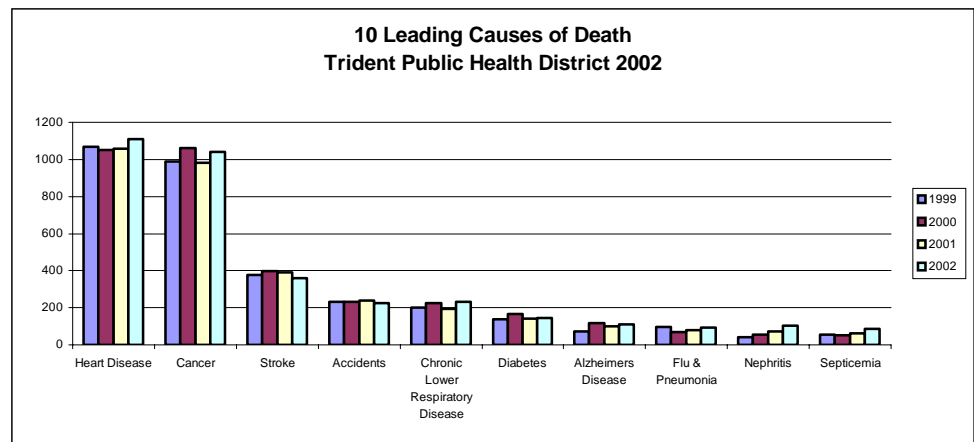
# *The Public Health of the Trident District*

The chronic disease health statistics for the district and the state are among the worst in the nation. Coastal South Carolina has led the nation for 50 years in the number of strokes suffered by its citizens. Over 10% of people living in the Trident Public Health District have been told by a doctor that they have diabetes. And the three leading causes of death continue to be heart disease, cancer, and stroke. Yet, these chronic illnesses can often be prevented. Smoking is the single largest contributor to heart disease and cancer, yet almost 39% of the people in the Trident District smoke every day, and another 16% smoke some days. Only 13% eat a green salad, and only 29% eat at least one piece of fruit, each day, less than 81% participate in physical activity during any month, and almost 55% are overweight or obese.

In addition to chronic illness, flu and pneumonia combined remain a leading cause of death in our district. Yet, these diseases, too, are mostly preventable by getting flu and pneumonia vaccinations. However, only 33.8% of the citizens in our three counties reported getting a flu shot in 2002.

Public Health must take the lead in preventing these illnesses. The Trident District must use innovative approaches to fund and develop methods to bring about a reduction in the rates and the effect of chronic diseases on its citizens. As we look forward, we plan a particular focus on goals that support healthy eating and active living, which will contribute towards our state realizing the goal of Healthy People Living in Healthy Communities. Every person in Berkeley, Charleston, and Dorchester counties can help by setting personal health goals such as:

- Eat at least five servings of fruits and vegetables daily.
- Reduce junk food and high-fat food items in your diet.
- Increase physical activity. Adults need at least 30 minutes daily (ideally 60) of moderate physical activity and children and teens need at least 60 minutes daily.
- Achieve and maintain a healthy body weight.
- If you smoke, quit.
- Get a flu shot every year. Get a pneumonia shot if you are over 65.



# *Healthy Communities*

The Trident Public Health District embraces the DHEC vision of “Healthy People Living in Healthy Communities”. We strive to improve the health of everyone in the three counties we serve and to prevent the spread of disease and promote healthy outcomes. To achieve these goals, many disciplines are involved: Environmental Health is responsible for food safety, on-site sewage and animal bite investigations; Health Education is responsible for developing and sustaining many community partnerships; the EPI Team responds to reportable diseases and outbreaks; our clinic operations provide needed direct services; and, new in FY03, is the position of Director of Public Health Preparedness.

Even though funding is limited for community activities, TPHD is involved in the implementation of many partnerships in the community. We have been involved with Community Health Partners of the Lowcountry (CHPL), our local organization for Healthy Communities, since its inception six years ago. The CHPL membership is approximately 300 individuals, representing about 50 service agencies from all three counties, and the district provided funding for the executive director for the year. In April, 2003, CHPL received a \$75,000 Grant from the Susan B. Komen foundation to implement breast cancer awareness and promote early detection via a media campaign aimed at African American women. Staff from Health Education are on the board of the First Steps program in each of the three counties. We actively support and participate in S.A.F.E. Kids and provide certified child safety seat technicians at Babys R Us several times during the year. Our Health Education director worked closely with Smoke Free Lowcountry to develop an initial assessment for a possible smoking ban in restaurants in Charleston.

In December of 2002, the Trident District designated our first ever Director of Public Health Preparedness. This position works closely with the first responder and hospital communities to address community needs in times of emergency and disasters, both natural and man-made.

The Trident District has a multidisciplinary team to respond to urgent reportable diseases, conditions and outbreaks. We have established relationships with the seven area hospitals, their infection control practitioners in particular. We receive reports of disease from the hospitals, from physicians’ offices and from laboratories. The Epi team provides 24/7 coverage for the reporting of urgent reportable diseases and to initiate outbreak investigations.



The district has formed several partnerships to address issues related to communicable diseases. We have Memoranda Of Agreements with the Charleston County Detention Center and three Department of Alcohol and Other Drug Abuse Services agencies to provide HIV testing, counseling and follow up to inmates and/or clients and provide TB services to inmates and/or clients who have positive TB skin tests or have the disease. This year we began providing HIV testing and counseling at the Crisis Interfaith Homeless shelter. Additionally, the district contracted with Roper/St. Francis to increase our care and support services for HIV positive clients.

# *Improve Health for All & Eliminate Health Disparities*

Minority populations continue to have a disproportionate rate of several diseases and health concerns. Minority groups make up about 35% of the combined population of Berkeley, Charleston and Dorchester counties according to the 2000 census. However, they comprise almost 57% of all hospital inpatient discharges for diabetes, 50% of all hospital inpatient discharges for essential hypertension, 64% of all emergency room visits for high blood pressure, 48% of all emergency room visits for flu and pneumonia, 50% of the total visits to an emergency room in the Trident district, and 73% of the people diagnosed with HIV/AIDS in Charleston County.

In order to reduce the gap in health risks, the Trident Public Health District focused many of our community activities on the minority populations. Among our efforts during the year were:

- ◆ Our Health Promotion team contracts with the MUSC Reach 2010 Diabetes Education Program to train their staff and community members on physical activity.
- ◆ Out of the total diabetes education classes provided by our Certified Diabetes Educator, over 57% of the participants were African American.
- ◆ Under the Cardiovascular Health grant to SC DHEC from the CDC, the Trident District continued to sponsor aerobic and nutrition classes at seven predominately African American faith based and/or community centers.
- ◆ We are a partner with the March of Dimes in a program to promote prenatal care to African American women called The Storks Nest.
- ◆ The district has a key responsibility in maintaining active surveillance and providing testing, counseling, treatment, education, referral, follow up and partner notification of HIV/AIDS, STD & TB cases. Our HIV/AIDS health educator works closely with the Lowcountry AIDS Coalition in targeting African-American males with their HIV/AIDS risk reduction information. The Trident HIV Collaboration has grown and strengthened over the years getting more community based organizations and faith communities involved in spreading the HIV/STD prevention messages. Our HIV/AIDS Health Educator helped to organize and implement a number of activities: Stoned Soul Picnic HIV testing and counseling; Town hall meetings; MOJA Festival HIV testing and counseling; and radio interviews surrounding National Condom Day, Black Church Week of Prayer and other HIV/AIDS events.
- ◆ In September, 2002, our Moncks Corner clinic participated in the first “Take A Loved One To The Doctor Day” initiative promoted by the US Dept. of Health & Human Services. The “Take A Loved One To The Doctor Day” initiative is targeted primarily at African Americans, encouraging them to take charge of their health. Our Moncks Corner clinic provided a number of health screenings were conducted at the clinic that day. We also worked with the local ABC Radio affiliate that broadcasts the Tom Joyner Show (Tom Joyner is the national spokesperson for the day). The station had Trident District staff on air for live interviews prior to 9/24/02, and also provided a live broadcast from the clinic the day of the event.
- ◆ Our Immunization Program works in close partnership with the Tri-County Immunization Coalition, which promoted the need for flu vaccinations for African Americans through the Heart & Soul faith-based network.

## *Increase the Quality & Years of Healthy Life for Seniors*

Like much of the State of South Carolina and the United States, the population of three counties in the Trident Public Health District is aging. According to the 2000 US Census, there are now almost 60,000 people, or 10.9% of the population, who are aged 65 or more living in Berkeley, Charleston, and Dorchester counties. This is an increase of 31% over the 1990 US Census.

To be able to serve all of the residents in the District, we offer different programs and activities that are targeted toward the senior population:

- ◆ Our Home Health program provides skilled nursing and therapy assistance to home bound people under their doctors' orders. Many of our clients are senior citizens with health problems such as diabetes and stroke recovery.
- ◆ Our Immunization program provided flu and pneumonia shots to senior citizens during Seniors Day at the Coastal Carolina Fair, at the Lowcountry Seniors Center, and the Charleston Senior Center.
- ◆ Out of the total diabetes education classes provided by our Certified Diabetes Educator, 1/3 of the participants were over 65 years of age.

As no funding has been directed to target the senior population, we do not foresee any growth or additional projects in this area.

## *Assure Children & Adolescents are Healthy*

Much of the emphasis in the district is in working towards the goal of healthy children. Many Trident Public Health District staff are involved in leadership roles in a variety of community organizations, advisory boards, and committees that target youth. The district has taken an active role in the schools. Classes and activities promoting a variety of healthy behaviors are presented to students participating in various school programs. The Health District continues to provide a Health Educator based at the Charleston County School District as a resource for Health teachers within the schools. Staff is actively involved in First Steps in all three counties.

Through interagency agreements, our Environmental Health staff conduct safety and sanitation inspections in child care and foster care facilities. We also inspect school facilities to identify potential problems with water, sewer, and general sanitation and safety hazards inside and outside of the facility. Safety hazards that have been identified include improper storage of chemicals, physical hazards such as loose handrails and playground hazards. Two Trident Environmental Health staff have obtained a nationally recognized certification in playground inspection and are in the process of implementing educational programs to address playground safety. The district believes that its active and innovative pursuit of improving the conditions of schools, child care and foster care facilities will produce positive results in decreasing the environmental and safety hazards to which children are exposed.

A key focus for the Trident District begun during FY03 is an emphasis on decreasing the percentage of children and adolescents who are overweight and obese. Two programs initiated in the district are “Kids In Motion” and “I Can Do It”.

*Kids In Motion* - The focus of the Kids In Motion program is to increase physical activity and life skills training among pre-teens in five Charleston area schools. This is accomplished through walking or running as these are accessible and inexpensive activities. The after-school curriculum has three focuses: academic content, academic support, and physical activity. Classes in general nutrition, safety, and tobacco prevention are offered. Students enrolled in this program participate in numerous activities designed to encourage positive decision-making skills, promote higher self-esteem, and increase physical activity. The program is a collaborative effort between Trident Public Health District, the West Ashley Community Education’s Kaleidoscope Program, Community Health Partners, and the American Cancer Society. Students enrolled in Kids In Motion participate in twice weekly after-school academics and physical activity. Students are rewarded for attendance and participation. While attending the program, students also learn about healthy lifestyle choices. This occurs by engaging students in various physical activities and skills building exercises. As a component of this life skills training, Trident Public Health District health educators, school nurses, and physical education teachers are utilized to teach the physical activity and tobacco prevention education materials. Trident Public Health District also provides a nutritionist to teach classes in nutrition to the students.

*I Can Do It* - This is a multi-discipline healthy behavior-weight management program for children from 7 to 14 years of age. Social Work, Health Education and Nutrition staff worked together to deliver the program series. A total of 18 children and at least one parent participated. Referrals to the program are solicited from local family medicine and pediatric providers. Plans for SFY 04 are to continue offering the program with a goal of at least 4 sessions per year. We will also begin offering some on-going support and follow-up to the graduates of the program.

The Trident District is one of only three DHEC Health Services Districts that has a dental health program. We work in partnership with MUSC and private dental care providers to offer dental services for elementary and middle schools in Charleston county that have 50% or more of the children enrolled in the school who qualify for the federal free and reduced lunch program.

This fiscal year represented the first full year that we managed the school nurse program for the Charleston County School District. We provided training and assurance that the school nurses were updated on school health practices. Medical direction and support is provided by the Trident District Medical Director and presentations were made in the community stressing the need for more school nurses to help watch over the health of our children.

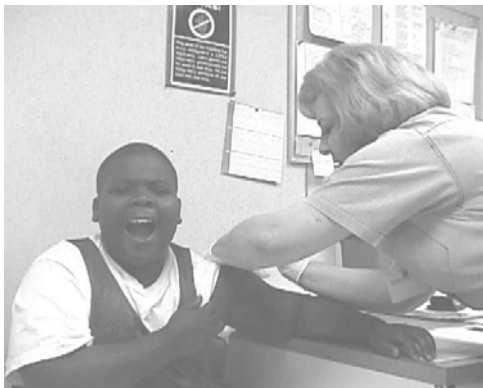




A number of our direct service programs are designed to help assure children stay healthy. In the Trident district, Children's Rehabilitative Services (CRS) nurses work with children who have certain long-term illness or special needs to make sure they get the care they need. CRS has established formal partnerships with four of the largest MUSC Pediatric Specialty Ambulatory Care Clinics whereby CRS nurses provide liaison services for children with special health care needs (CSHCN) for CRS district staff throughout the state. Trident CRS also has informal agreements with four smaller MUSC Pediatric Specialty Ambulatory Care Clinics. In addition, Trident CRS staff provide all service coordination and clinic follow-up for CRS and Family Support Services for district CRS children through home, school, phone and MUSC clinic visits. At the end of the fiscal year, the Trident CRS program provided services to over 1,000 CSHCN.

In our Postpartum Newborn Home Visit program, a nurse visits with the new mother and her new infant to make sure that both are in good health. The visit includes an evaluation of the environment, the condition of the new mother, and a physical examination of the newborn infant. The nurse offers education, counseling and referrals based on the evaluation. This visit is a benefit offered by Medicaid insurance and we provided over 1,000 home visits during the fiscal year.

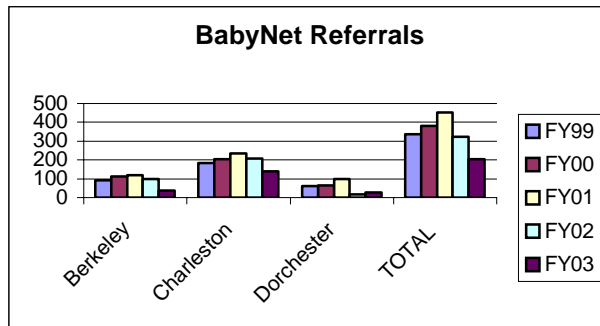
The 1<sup>st</sup> Steps Home Visitation program offers home visits to help families better address health and development issues under the Charleston County and Berkeley County 1<sup>st</sup> Steps programs. Our staff looks at growth, developmental, and infant stimulation concerns that may affect a child from learning later in life.



We also offer immunizations required for school entry and day care attendance and education, and follow-up services for children up to the age of six years who have been diagnosed as lead poisoned. For babies up to three years of age who may need special help to learn to see, hear, listen or walk, we have the BabyNet program.

# Program & Clinic Highlights

## BabyNet



The goal of the BabyNet Program is to provide early identification and intervention for children from birth to three years of age with developmental delays. Any infant or toddler from birth to three years of age who is developing more slowly than his peers in one or more of five areas of development, regardless of economic status, is eligible for BabyNet services. Eligibility may also include children with a diagnosed physical or mental condition that has a high probability of resulting in developmental delay. Referrals are made by physicians, other health care professionals, day care centers, hospitals, therapists, health agencies, schools, Head Start, parents and friends. At the end of the fiscal year BabyNet had an active caseload of 213 children.

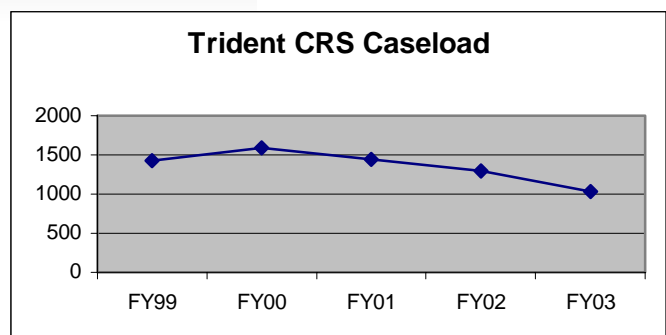
## Child Health

Following the direction of DHEC Central Office in establishing health homes for clients, together with the declining show rate for Well Child/EPSTD appointments in our clinic sites, this year we ceased offering Well Child/EPSTD check ups for children. DHEC also discontinued the Medicaid Outreach Nurse program that had been funded via a DHEC contract with DHHS which had focused on working with families to ensure that children had medical homes, (they were being seen by a private physician or primary care center).

Our Child Health Program now focuses on home visitations under two programs, First Steps Home Visitation, and Postpartum Newborn Home Visits, as well as follow up newborn screening at some clinic sites. This was the second year for our Postpartum Newborn Home Visit program and our nurses provided over 1,000 home visits. This was also the first full year for our efforts in conjunction with the 1st Steps program in Berkeley and Charleston counties. Our nurses provided 521 home visits to families in Berkeley county and 656 home visits to families in Charleston county.

## Children's Rehabilitative Services

The goal of the Children's Rehabilitative Services (CRS) is to assure that appropriate services are available to and accessible for children with special health care needs. Referrals may be made by physicians, nurses, social workers, other health care providers, financial counselors, hospital discharge coordinators, clinic staff, parents and family. At the end of the fiscal year, CRS had an active caseload of 1033 children.



## *Clinic Services*

In our efforts to promote and protect the health of people in Berkeley, Charleston, and Dorchester counties, we operated eight clinic sites. We operated two clinics in Berkeley County as the Berkeley County Health Department: Moncks Corner, and Goose Creek. We operated four sites in Charleston County: downtown on Charleston Center Dr., in Mt. Pleasant, the North Area, and in the Northwoods area. Our Northwoods clinic provides services in partnership with a MUSC physician's practice. The Medical University offers pediatric primary care services, including immunizations and well child check ups. We continue to offer WIC, family planning and STD services at the Northwoods site. We also operated two clinics in Dorchester County as the Dorchester County Health Department: Summerville and St. George. Operation of the clinics accounts for 66% of the total district staffing positions.



We offer a number of different services at our clinics. The services offered at any one location may not be the same as other sites based on the number of clients and the size of the facility. In the Fiscal Year 2002 - 2003 we offered the Women's, Infants and Children's Special Nutrition Program (WIC) at all eight sites, and Family Planning at seven of the clinic sites. Sexually Transmitted Disease (STD), TB and HIV services are provided at four sites, and Immunizations at seven sites. Well child check-ups were discontinued at all of our sites, and the remaining district operated maternity clinic, at Moncks Corner, became a MUSC service.

Just like physician practices, our clinics prefer to schedule clients by appointment only, although some days other allowances are made for walk in requests. The number of people who do not keep their appointments affects our clinic efficiency and effectiveness. For all programs and all clinics combined, we experienced 37 % of our scheduled appointments who failed to show, consistent with previous years. This ranged from a high of almost 50% at North Area to a low of about 25% at Summerville. While our clinics prefer to work on an appointment basis, we were able to accommodate over 50,000 walk in visits during the year.

Our Goose Creek and Summerville clinics saw slight increases in the number of visits for Family Planning. However, overall we provided 28% less family planning services in FY03 than in FY02, contributing to the decrease in earned funds for the district.

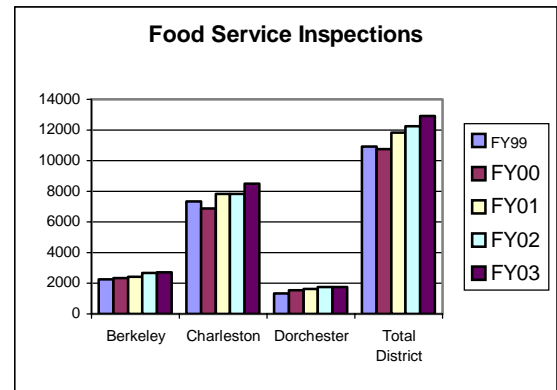
Our average monthly caseload for WIC increased at North Area, but decreased overall for the district by 3.5% over FY02. Again, our WIC clinics prefer to operate on an appointment basis, however, the number of people who fail to keep their appointments affects the programs efficiency and over 25,000 clients failed to keep their appointment. As a part of the WIC program, nutrition education classes are provided for clients. During the year, we provided 1,873 classes, an increase of over 30% in the number of classes offered just 5 years ago in FY99. Just as the number of people who do not keep their appointments is a factor in the operation of the clinics, the number of people who do not keep their appointments is a concern for the WIC program. Our eight sites had over 25,000 WIC appointments scheduled that were "no shows".

Immunizations, another of our key services, experienced a decline of 24% in the number of visits. Most of the decrease is attributable to the shift of the service at Northwoods from DHEC to MUSC. We did see a decrease in the number of visits for Immunizations of at least 14% at Mt. Pleasant, North Area, and Moncks Corner as well. This is reflective of the decrease in other clinic based child health services and the movement of children to medical homes.

# Environmental Health

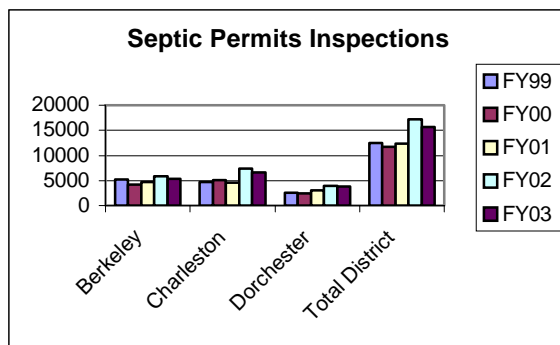
About 10% of our total staff is dedicated to Environmental Health, providing these services :

**Food Protection** - All food service facilities must have a valid permit from the department prior to serving food to the public. In addition to restaurants this includes schools, special event vendors, grocery stores, bakeries and delicatessens. The importance of this program cannot be underestimated. There is virtually no one who is not impacted in some way by the food inspection program.



The food industry in the Trident Health District represents one of the largest, fastest growing and most diverse food systems in the state. The rapid expansion in both the number and diversity of food service establishments has posed great challenges for the district food staff. They must keep up with the increasing workload and they must also keep abreast of cutting edge technology in the food industry. Current personnel shortages added to the many challenges indicated above have adversely affected the effectiveness of the food program in the Trident Health District. This threatening trend will be further impacted by the retirement of key senior staff who have opted for the TERRI incentive retirement program.

There are over 2,100 establishments selling food to consumers in the District, and our goal is to inspect each site four times a year. However, this effort has been hampered because of drought constraints. For FY03, food service inspections increased by 5.5% over the prior fiscal year, and 18.3% over the five year period from FY99 to FY03.



## On-Site Sewage Disposal -

All buildings occupied more than two hours per day must be served by an approved means of sewage disposal. Environmental Health permits and inspects septic tank systems to ensure proper sewage disposal. We experienced almost a 25% increase in the number of septic permit inspections we undertook this year compared to five years ago.

**General Sanitation & Vector Borne Diseases**- Nuisance complaints are investigated by environmentalists to abate environmental insult in neighborhoods throughout the district. Nuisances which the District will investigate include malfunctioning septic tank systems and vectors of communicable diseases.

Traditionally, our involvement with vector borne disease in the Trident Health District involved the investigation of complaints, educational efforts and providing technical assistance upon request. However, with the spread of West Nile Virus our role increased over the last year. We participated significantly in surveillance activities, which have included the shipping of numerous bird and mosquito samples for testing. We also coordinated a major educational forum in Charleston aimed at providing information to the public and attempting to limit the incidence of mosquito borne disease in Berkeley, Charleston and Dorchester counties. During the 2003 surveillance season, from 4/14/03-11/15/03, 147 birds were sent by the Trident district to the DHEC lab for testing. Of these, 56 birds tested positive for the virus. In addition to the birds, one person and seven horses also tested positive for the virus.

The summer of 2003 also saw a resurgence of Eastern Equine Encephalitis (EEE), another mosquito borne virus. The disease affects mostly horses, which are tested by Clemson University. In the three counties covered by the Trident Public Health District, eight horses and/or mules tested positive for this disease in 2003.

*Rabies* - All animal bites to humans must be reported to Environmental Health for investigation. Rabies is not only a highly infectious disease, it is fatal to humans if not treated. In suspected cases of rabies the animals are sent to the DHEC laboratory in Columbia to be tested. If the results are positive, the individual begins treatment as soon as possible. As development continues to expand into rural areas, the incidence of contact between humans, their pets, and wildlife becomes more frequent. This along with the ongoing interaction between humans and domestic animals provides a constant source of potential rabies exposures that must be investigated. The rabies prevention program is a cooperative effort between our staff and local animal control officers, veterinarians, animal shelters, hospitals, physicians and other stakeholders in the community.

During the year we sent 455 animals to be tested for rabies, of which 44 tested positive for the disease. Our rabies team investigated 2070 reports of animals biting people. We provided rabies preventive treatment to 65 individuals.

## ***Epi Team***

Our Epi team is responsible for the surveillance, reporting and investigation of reportable and infectious diseases. The team consists of nurses, an epidemiologist, the District Health Director, District Medical Director, District Nursing Director, District Director of Public Health Preparedness, Public Information Coordinator, a Health Educator, Environmental Health Staff, and our District Pharmacist. The health departments' responsibilities are to have a system in place to receive reports; promote surveillance and timely reporting by providers, hospitals, and labs; coordinate response and surveillance across program/discipline lines; provide trained staff to respond; ensure appropriate and timely public health response to urgent immediate reportable conditions and outbreaks; monitor and route non-urgent reports to the acute Epi division; monitor surveillance data for trends and clusters; and provide support information to internal and external partners.

The fiscal year 2002/2003 saw significant changes to our Epi Team. A Regional Epidemiologist covering coastal SC was added in August, 2003 and is based on our offices. A second, full time, nurse joined us in October, 2003. And, we added an Infectious Disease Physician Consultant in the spring of 2003. All our new additions are key members of our Epi team and in our disease response organization.

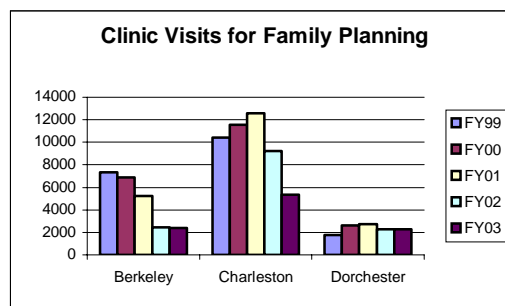
The EPI team reports are based on a calendar vs. a fiscal year. The reportable diseases are reviewed each year and new conditions become reportable. In 2003, Varicella, or chicken pox, was added as a reportable disease, and we received 67 reports of the disease. While not newly reportable, our follow up and services offered for Hepatitis B changed. Beginning in FY03, one of our Epi nurses conducted extensive follow up on reports of Hep B and offered testing and vaccinations for close contacts of people with the disease. The ability to offer the service resulted in much better reporting of the condition, bringing to 130 the number of investigations we undertook for this disease.

The nationwide increase of antibiotic resistant bacteria was brought to the forefront in the Trident Public Health District in 2003. While Methicillin Resistant Staphylococcus aureus (MRSA) is not a reportable condition, unusual clusters of any infectious disease are, and we investigated two clusters of MRSA in area sports teams. And the number of reports of Vancomycin Resistant Enterococcus (VRE) continues to increase.

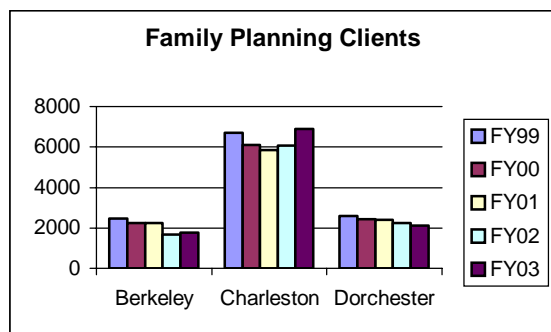
Viral meningitis is also not a reportable disease, however, South Carolina experienced an increase statewide during 2003. At the request of Columbia, our Epi Team contacted the area hospitals and determined that there had been 32 cases of the disease in our three counties. The year was also the year of Pertussis, or whooping cough, in Trident. We had confirmed reports of 25 cases of the disease, almost all of which were associated with an outbreak that originated in the Waccamaw District. We sent out over 700 letters to parents with children in 7 day cares, church schools and/or children's art schools and conducted contact investigations with 260 individuals. Reports of Group B Strep also increased to 17, the result of testing pregnant women for the condition.

## Family Planning

Family Planning is a clinic based service that includes counseling and education on pregnancy planning and all birth control options, including abstinence. Also provided are examination, pap smear, STD screening and treatment, pregnancy testing, and monitoring and provision of contraceptive measures. All the family planning services in



the Trident Public Health District are provided by female nurse practitioners. Many private insurance plans do not cover a women's annual exam or contraceptives of choice. So, whether a women has insurance or not, this program offers a thorough, and very affordable, women's reproductive health service.



During the 2002/2003 fiscal year our eight clinics that offer family planning services provided help to 10,908 clients, an increase of 8% over the previous year.

## ***Family Support Services***

Family Support Services (FSS) supports, supplements and enhances the full and appropriate use of primary medical care and promotes the practice of healthy behaviors. Services are based on the family's ability to address their health condition, related to identified risk factors. The services are client and family centered, are provided by an interdisciplinary team and communicated to the primary care provider. Services are performed in our clinics, in the schools, or in the home.

Providers of Primary Care Enhancement services include Registered Nurses, Licensed Social Workers, Registered Dietitians, Health Educators, Licensed Practical Nurses, Disease Prevention Specialists and Public Health Assistants.

During FY03, our FSS staff provided 37,982 billable units and 9,241 non-billable units. Social Work is responsible for the largest amount of Family Support Services, providing 49% of all units. This is followed by Nursing at 18%, Nutrition at 17% and Health Education at 10%.

## ***Health Promotion & Chronic Disease Prevention***

Our Health Promotion and Chronic Disease Prevention Program is one that is driven by the community. Consisting of Health Educators, the Health Promotion team works hand in hand with community organizations such as Smoke Free Lowcountry, March of Dimes, S.A.F.E. Kids & Community Health Partners. The goal of the program is to help communities develop behavior and infrastructure changes that encourage better health. The Health Promotion team focuses their efforts on preventable health risks such as not smoking, exercising, good nutrition, preventing heart disease, and car seat safety. By promoting these behaviors they help to reduce the incidence of osteoporosis, lung cancer, heart disease and injuries.

Among the many activities our Health Promotion team participated in during the fiscal year 2001/2002 were:

- ◆ continued the "Get Moving, Get Fit" aerobics program in partnership with seven area churches and/or community centers
- ◆ continued to represent the Trident Public Health District at most health fairs and other large community events such as Earth Day, the annual Health & Wellness Fair and the Coastal Carolina Fair.
- ◆ joined with the MUSC Reach 2010 diabetes initiative promoting nutrition and physical activity

The effectiveness of the program was somewhat limited by lack of resources, both in staff and operational funding. The limited resources mean that much of the Health Promotion & Chronic Disease Prevention team's efforts are spent on helping other organizations to become more effective with their programs. At the end of the fiscal year, our district health promotion staff consisted of the District Director of Health Education, an administrative support person, and four community based health educators.

## ***HIV***

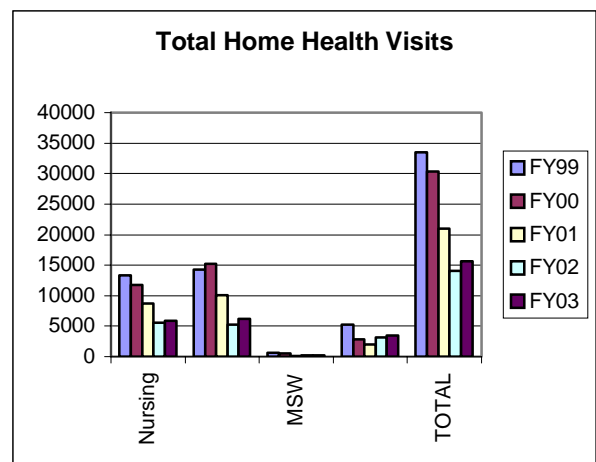
The goal of the HIV program is to reduce the transmission of HIV infection in the Trident District. The HIV program is committed to this goal by providing the following services:

- ◆ Free confidential HIV counseling, testing and referral. Voluntary HIV testing services are provided by appointment at two sites in Charleston; the Charleston Center Health Department downtown site and the North Area Clinic; one site in Berkeley County, Moncks Corner; and one site in Dorchester County, Summerville.
- ◆ Identify and notify all named sex and/or needle sharing partners of HIV infected persons
- ◆ Targeted health education programs with HIV prevention messages to groups at highest risk for HIV
- ◆ Work with community agencies/groups to build the community's capabilities to deliver HIV/AIDS education programs
- ◆ Social work/case management services for HIV infected persons

Staff in the Trident District provided over 5,500 HIV tests from 7/1/02 - 6/30/03, with 66 new cases identified. This increased the total of people living with HIV or AIDS in the Trident District to over 3,000. Total number of HIV/AIDS visits to our clinic sites decreased by over 34% from the previous year, and have decreased by 52% over the past five years.

## ***Home Health***

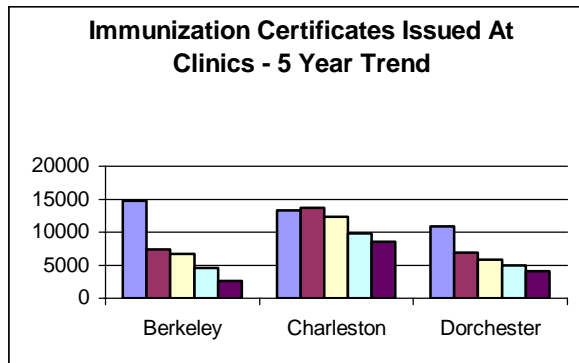
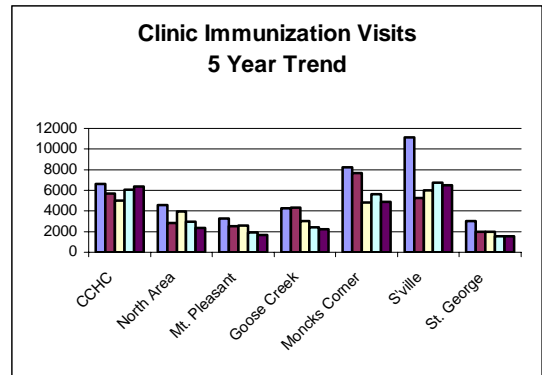
Trident Home Health Services is licensed and certified as a Medicare and Medicaid provider of home health services. Home Health Services provides health services to persons in their homes to help them in achieving or maintaining their optimal health status, to facilitate earlier discharge from hospitals and nursing homes, to prevent or delay institutionalization, and to provide care and comfort to the terminally ill. Our professional and supportive services are provided under the direction of a physician to patients who are essentially homebound due to illness or injury. The comprehensive health care package includes skilled nursing, physical therapy, speech therapy, occupational therapy, medical social work and home health aides. The district's Home Health program provided 15,686 home visits during the fiscal year, an increase of 11% over the previous year.





## Immunizations

The goal of the Immunization Program continues to be to increase vaccine coverage in infant/child, adolescent, adult and senior populations according to the Association for Professionals in Infection Control (APIC) recommendations, thereby eliminating the occurrence of vaccine preventable diseases. Immunization programs have been listed as one of the top ten public health success stories of the last 100 years. South Carolina participates in the VAFAC program which makes “free” vaccine available for children who are Medicaid enrolled, uninsured, under insured or are American Indian or Alaskan Native, eliminating a barrier to immunizations.



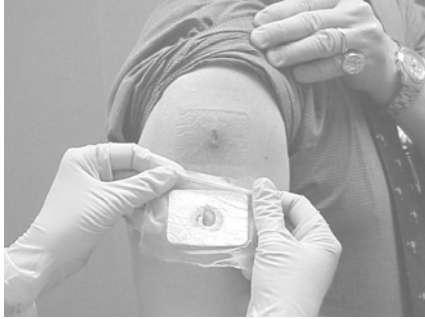
Immunizations are offered in all our clinic sites, except Northwoods, where immunizations are provided by our MUSC partners.

Immunizations are required to attend school and child care in South Carolina. In addition to providing the shots, we also issue the certificates that parents and children need for their school records.

## Public Health Preparedness

The challenge for Public Health is to develop the skills set in its staff required to help protect the health of the community against biological, chemical, and other terrorist events as well as natural disasters. Public Health took a large step towards learning to work in conjunction with other first responders with the implementation of a new position dedicated to these efforts, the Director of Public Health Preparedness. The changing emphasis toward multi-disaster preparation, including terrorist events, has increased the demands of this program. Our involvement at every level in the planning process has increased. The need for additional training in non-traditional roles has increased. As the coastal areas continue to grow, and the role that we assume in disaster preparedness continues to change, the effort required to meet the demands of public health and disaster preparedness is growing as well.

At the district level we routinely meet with county Emergency Planning Departments, EMS, DSS, School officials, hospital and other health care facility managers and the American Red Cross. We are adapting the public health responses in the Trident District to use the principles of Incident Command Structure (ICS) to accomplish our goals and to meet our responsibilities.



January, 2003 saw the first time vaccination against smallpox has been offered in the United States in over 30 years. In the Trident District, we provided approximately 95 vaccinations to healthcare workers. During the fiscal year, a draft plan for distribution of the National Strategic Pharmaceutical Stockpile in case of a disaster was initiated. Several staff members attended various levels of training in bioterrorism, chemical terrorism, risk communication, and incident command/unified command structure during community emergency events.

## ***School Health Program***

As we moved into the first full school year managing the health services at Charleston County schools great strides were in in two key areas:

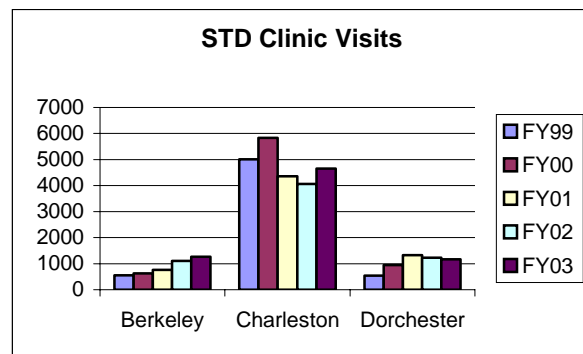
- ◆ In April, Medicaid billing was initiated by school nurses that resulted being able to bill the insurance program for over \$23,000 for services provided to eligible children. This money is then used to increase the health services that the Charleston County School District is able to provide in the schools.
- ◆ As a result of community presentations by the program manager stressing the need for increased school nurses and school based health services, one church adopted an elementary school and donates funds each month to be used by the school nurse for supplies, and another church donated funds to be used toward a medical computer program.

## ***Sexually Transmitted Disease***

The goal of the Sexually Transmitted Disease (STD) Program is to reduce the incidence and transmission of sexually transmitted diseases. Program activities are clinic based and contribute to reducing the transmission of the diseases by case interventions including contact investigation, examination and treatment of infectious individuals, and counseling and education.

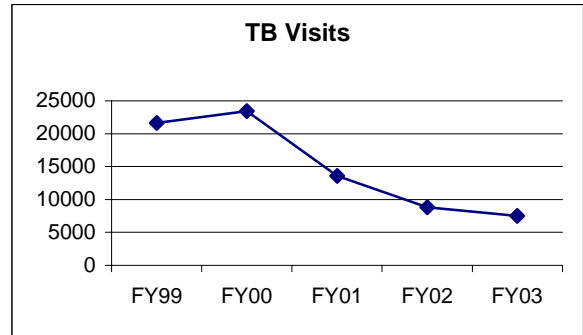
We provided about 10% more clinic visits for clients in the fiscal year 2002/2003 than we did in the fiscal year 2001/2002, and 27% more than we did five years previously. During the year we stopped providing STD clinic services at our North Area clinic. Many of the clients from North Area were referred to our Charleston Center clinic, which experienced a 27% increase in visits.

Chlamydia continues to be of particular concern in the STD program due to its rapid and steady increase. The number of reported cases of this disease has almost doubled in five years, and by over 24% in just one year. Progress has been made in reducing the incidence of gonorrhea in the Trident District. Reported cases of this disease have decreased by just under one third in five years.



## Tuberculosis

The goal of the Tuberculosis program is to interrupt the transmission of TB and to eliminate the disease as a public health threat. The program provides treatment and follow up to all diagnosed and suspected cases of tuberculosis. Included in the program services are chest x-rays, PPD skin testing, laboratory services, anti-tuberculosis drugs, directly observed therapy, contact investigation and medical follow up. Services are provided in three of our clinics, one in each county. Services are also provided at a client's home when directly observed therapy is needed to ensure the treatment plan is followed. District wide, the total number of visits at our clinics with TB clients decreased by over 13% from the previous year, and by almost 9% over a five year period.

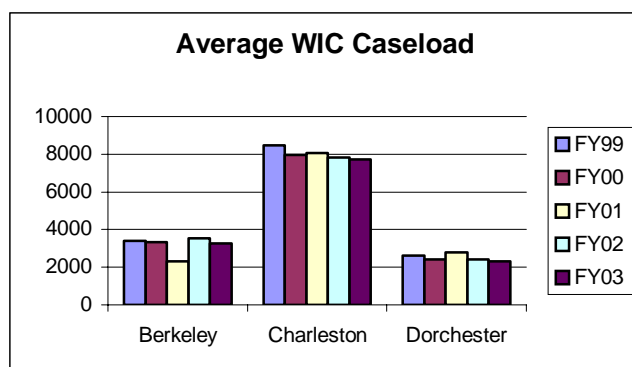


## Vital Records

Vital Records provides for the registration, correction and certification of vital events, including live births and deaths. The Trident Public Health District operates a Vital Records office in each of the three counties we serve. From these three offices we registered over 8,600 births and issued copies of over 21,000 birth certificates. We also registered over 5,200 deaths and issued copies of over 47,000 death certificates.

## Women, Infant, & Children's Special Nutritional Supplement Program (WIC)

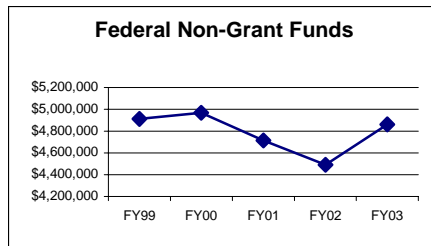
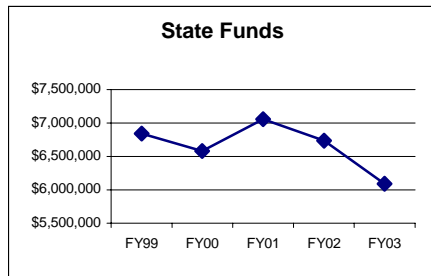
The Women, Infants and Children (WIC) Nutrition Education and Supplemental Food program serves pregnant, breast feeding and postpartum women as well as infants and children under five (5) years of age who are at nutritional risk. Program services include nutrition assessments, nutrition counseling, group nutrition counseling and education, and delivery of supplemental foods such as formula for infants, milk, eggs, cheese, juice and beans for women and children who are income eligible. Referrals to assure appropriate health care are an important component to the success of the WIC program.



Our WIC services are clinic based. The average caseload for the program decreased slightly during FY03 over the previous fiscal year, from 13,784 to 13,302, with the largest decrease experienced in Berkeley County. Over the five year period FY99 - FY03, our average WIC caseload has decreased by almost 11%, affecting a key source of funds for the Trident Public Health District. This mirrors the statewide trend, and can be partially explained by the requirement added in FY99 for proof of income rather than self-report.

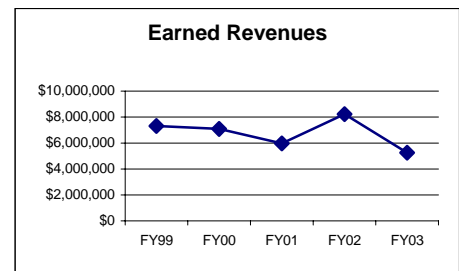
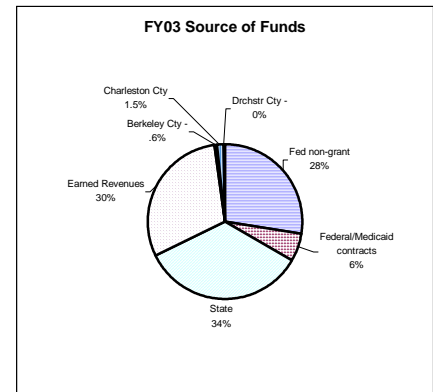
# Budget Report

The Trident Public Health District budget for FY03 was at the lowest point in at least five years. State funding represented the single largest category of funding for the district. However, in the face of SC budget cuts, state funding was at the lowest point in the past five years. We are fortunate that we are able to earn a portion of our budget, however, earned funds were also at their lowest point in five years.



Funding from the federal government, excluding grants, is the third largest source of money for the district. While funds from that source increased by just over 8% from the previous year, it has still decreased from funding levels five years ago.

The largest portion of the budget received from federal non-grant funds is devoted to implementing the WIC program on behalf of the US Dept. of Agriculture.



The funding allocated by the county contingency source is the program area where the largest single percentage of funds are directed. Those funds provide for much of the administrative, environmental health, and clinic budgets for the district.

